



**PRISONS**  
**Health and Wellness Services**  
**Policies and Procedures**

<b>Title</b>	Nursing Orientation, Mandatory Training and Competency Evaluation		
<b>Section</b>	P - 9	<b>Issue Date</b> August 17, 2021	<b>Supersedes Date</b> May 2010

**References**

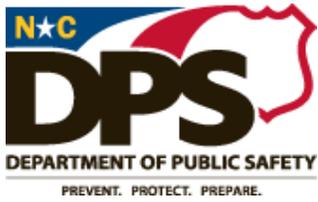
**Performance-Based Standards and Expected Practices for Adult Correctional Institutions, 5<sup>th</sup> Edition 5-ACI-6B-03(M), 5-ACI-6D-02(M); Nursing Services Orientation & Education webpage [https://internal.doc.state.nc.us/dop/nursing\\_services\\_orientation.htm](https://internal.doc.state.nc.us/dop/nursing_services_orientation.htm); Prisons Policy Chapter A .0900 Employee Training**

**I. PURPOSE**

To provide for a comprehensive, standardized orientation which encompasses administrative, custody and health and wellness information, for in-service training, on-the job training, and continuing education to enhance nursing knowledge, skills, and competency; and for appropriate evaluation of clinical skills to ensure the safety and quality of the nursing care provided to the patient population.

**II. DEFINITIONS**

- (a) Licensed nursing staff – registered nurses (RN) and licensed practical nurses (LPN).
- (b) Unlicensed nursing staff – Correctional Healthcare Assistant I (CHAI) and II’s (CHAI) and Medical Record Assistants (MRA).
- (c) Nursing Staff – licensed nursing staff, unlicensed nursing staff, Medical Record Assistants and other clerical staff assigned to health and wellness.
- (d) Continuing Education – Educational programs designed to build or improve nursing skills and knowledge. These programs may provide formal recognition of credit by awarding contact hours through the governing body of education for the profession.



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- (e) In-Service Training – Training provided to ensure processes/practices are implemented in accordance with North Carolina Department of Public Safety Prisons policies and procedures. This training can be classroom lecture and/or self-study on LMS.
- (f) On-the-Job Training – Informal training provided by a peer preceptor.
- (g) Competency Evaluation/assessment – An evaluation of the capabilities of a member of nursing staff against expected requirements in order to determine the degree of proficiency in a clinical skill.
- (h) Orientation - Training provided to a new employee or to an employee who has new responsibilities.
- (i) Preceptor – experienced health and wellness staff responsible for providing specific orientation to co-workers.
- (j) Proficient – performs a specific task well.

**III. POLICY**

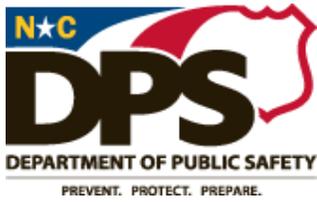
- (a) The facility nurse manager or regional nurse supervisor shall ensure that nursing staff receive orientation, training and competency evaluation related to their job responsibilities, department, division and section expectations.
- (b) The nurse manager or regional nurse supervisor shall assign a preceptor(s) to provide orientation and on-the-job training, and to conduct the competency assessments for new employees or employees who have changed positions.
- (c) Nursing staff shall not be assigned or delegated duties involving skills that they have not been determined to be proficient in.
- (d) Orientation shall be completed within the first 90 days of hire except for externally scheduled classes such as OPUS, etc.



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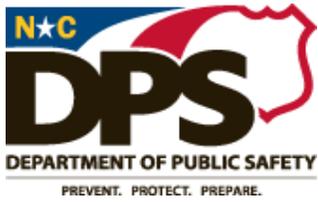
- (1) In addition to the statement orientation checklist, the facility nurse managers/designee shall add to staff training facility-specific clinical tasks or items such as Standard Operational Procedures, and shall ensure that staff are trained on these additional requirements for that location.
  - (2) Multiple departments and disciplines shall be involved in orienting staff, such as Office of Staff Development and Training (OSDT), custody officers, administrative staff, etc.
  - (3) Newly hired staff shall attend a facility or regional Nursing Orientation training scheduled by the regional health services coordinator or educator that uses the standardized curriculum reviewed by the Nursing Education Director and Nurse Education Committee.
  - (4) Facility nursing orientation shall be scheduled by the facility Nurse Manager/designee or Educator.
- (e) Competency Assessment/Evaluation
- (1) Licensed and unlicensed nursing staff shall complete an annual “Self-assessment of Clinical Competencies.”  
[https://internal.doc.state.nc.us/dop/nursing\\_services\\_orientation.htm](https://internal.doc.state.nc.us/dop/nursing_services_orientation.htm)
  - (2) Facility nurse manager/designee shall add to the self-assessment form pertinent skills based on the facility’s medical mission, and develop individual competency evaluation forms for those skills. This may include, for example, new medical equipment, clinical protocols, etc.
  - (3) Facility nurse manager/designee shall document “NA” (non-applicable) for skills not performed at their facility.
  - (4) The employee shall rate their level of proficiency for each skill listed unless it is a skill not within their scope of practice or not required for the facility’s medical mission. In this case the item is to be marked “NA” for non-applicable.



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- (5) In-service training shall be provided to all nursing staff not proficient in skills needed to do their job.
  - (6) Competency of required skills shall be documented on all licensed and unlicensed nursing staff.
  - (7) Medical Record Assistants and other clerical staff shall have an evaluation of skills pertinent to their job. These skills will include but not limited to OPUS, computer skills, management of health care records, etc.
  - (8) Preceptor(s) shall be responsible to provide the employee on-the-job training for each self-assessment skill rated less than “performs well.”
  - (9) Preceptors shall assess the employee’s competency using the skills competency checklists located on the Health and Wellness Nursing webpage [https://internal.doc.state.nc.us/dop/nursing\\_services\\_orientation.htm](https://internal.doc.state.nc.us/dop/nursing_services_orientation.htm). Each checklist designates how many successful demonstrations shall be needed before competency shall be determined as proficient.
  - (10) Evaluator’s and employee’s initials and signature are to be recorded on the competency checklist.
- (f) **Mandatory Training**
- (1) Licensed, unlicensed nursing staff and Medical Record Assistants/clerical staff shall attend training as specified for their position.
  - (2) Training will be scheduled within 90 days of position assignment with the exception of external programs such as Board of Nursing training.
- (g) Completed orientation and competency evaluation forms shall be maintained in the employee’s personnel file and a copy kept by the nurse manager.
- (h) Refer to the current Nursing Orientation Manual or Health and Wellness Nursing webpage ([https://internal.doc.state.nc.us/dop/nursing\\_services.htm](https://internal.doc.state.nc.us/dop/nursing_services.htm)) for orientation



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information, competency evaluation forms, and associated in-service or on-the-job training instructions.

- (i) The nurse manager/designee shall be responsible to ensure employee training is completed in accordance with Prison Policy Chapter A .0900 Employee Training.

August 17, 2021

Todd E. Ishee  
 Commissioner of Prisons

Date